

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE	PAGE OF PAGES 1 2
2. AMENDMENT/MODIFICATION NO. P00001	3. EFFECTIVE DATE See Block 16C	4. REQUISITION/PURCHASE REQ. NO.	5. PROJECT NO. (If applicable)
6. ISSUED BY ICE/Detention Compliance & Removals Immigration and Customs Enforcement Office of Acquisition Management 801 I Street, NW Suite (b)(6) WASHINGTON DC 20536	CODE ICE/DCR	7. ADMINISTERED BY (If other than Item 6) ICE/Detention Compliance & Removals Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, suite (b)(6) Washington DC 20536	CODE ICE/DCR
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code) GEO GROUP INC THE 621 NW 53RD ST STE (b)(6) BOCA RATON FL 334878242		(x) 9A. AMENDMENT OF SOLICITATION NO. 9B. DATED (SEE ITEM 11)	
CODE 6127064650000	FACILITY CODE	X 10A. MODIFICATION OF CONTRACT/ORDER NO. HSCEDM-14-A-00001 10B. DATED (SEE ITEM 13) 12/17/2013	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers _____ is extended. is not extended. Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified

12. ACCOUNTING AND APPROPRIATION DATA (If required)

See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) Unilateral Modification

E. IMPORTANT: Contractor is not, is required to sign this document and return 0 copies to the issuing office

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 612706465

The purpose of this modification to this agreement is to:

1) Update the rate for Off Site Guard Services in accordance with United States Marshal Service (USMS) Contract ODT-7-C-0003 Modification #0056. The rate will increase from (b)(4) to (b)(4) per hour.

2) Update the COR and ALT COR for this contract.

COR Changed:

From (b)(6);(b)(7)(C) 956-729 (b)(6);(b)(7)(C)

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

(b)(6);(b)(7)(C)

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

(Signature of person authorized to sign)

(Signature of Contracting Officer)

16C. DATE SIGNED

2/6/2015

NSN 7540-01-152-8070

Previous edition unusable

STANDARD FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

NAME OF OFFEROR OR CONTRACTOR
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>To: [REDACTED] Email: [REDACTED] Phone: 956-729-[REDACTED]</p> <p>ALT COR Changed: From: [REDACTED] To: [REDACTED] Email: [REDACTED] Phone: 956-729-[REDACTED]</p> <p>This BPA, including all proceeding delivery orders shall be placed in accordance with the terms and conditions of Contract ODT-7-C-0003. The OFDT Contract, including the modification authorizing ICE to issue direct delivery orders to the vendor is attached to this BPA.</p> <p>Exempt Action: Y Period of Performance: 01/01/2014 to 04/20/2027</p>				

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1

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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

1. DATE OF ORDER 12/17/2013	2. CONTRACT NO. (If any) HSCEDM-14-A-00001	6. SHIP TO: a. NAME OF CONSIGNEE Indicated on call	
3. ORDER NO.	4. REQUISITION/REFERENCE NO.		
5. ISSUING OFFICE (Address correspondence to) ICE/Detent Mngt/Detent Contracts-DC Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, Suite (b)(6)(b)(7)(C) Washington DC 20536		b. STREET ADDRESS	
		c. CITY	
		d. STATE	
		e. ZIP CODE	
7. TO: a. NAME OF CONTRACTOR GEO GROUP INC THE		f. SHIP VIA	
b. COMPANY NAME		g. TYPE OF ORDER	
c. STREET ADDRESS 621 NW 53RD ST STE 700		<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: <input type="checkbox"/> b. DELIVERY Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.	
d. CITY BOCA RATON		e. STATE FL	f. ZIP CODE 334878242
9. ACCOUNTING AND APPROPRIATION DATA Indicated on call		10. REQUISITIONING OFFICE	

11. BUSINESS CLASSIFICATION (Check appropriate box(es))								12. F.O.B. POINT Destination
<input type="checkbox"/> a. SMALL	<input checked="" type="checkbox"/> b. OTHER THAN SMALL	<input type="checkbox"/> c. DISADVANTAGED	<input type="checkbox"/> d. WOMEN OWNED	<input type="checkbox"/> e. HUBZone				
<input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED	<input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM	<input type="checkbox"/> h. EDWOSB						
13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L NO.			15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) Indicated on call			16. DISCOUNT TERMS Indicated on call

17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	DUNS Number: 612706465 The purpose of this agreement is to establish a Blanket Purchase Agreement (BPA) which authorizes Immigration and Customs Enforcement (ICE) to issue delivery orders against the Office of Federal Continued ...					
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT			20. INVOICE NO.	\$0.00
	21. MAIL INVOICE TO:					
	a. NAME Indicated on call	b. STREET ADDRESS (or P.O. Box) (b)(6),(b)(7)(C)	c. CITY	e. ZIP CODE		

22. UNITED STATES OF
AMERICA BY (Signature)

23. NAME (Typed)

(b)(6),(b)(7)(C)

TITLE: CONTRACTING/ORDERING OFFICER

**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

PAGE NO

2

IMPORTANT: Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER	CONTRACT NO.	ORDER NO.				
12/17/2013	HSCEDM-14-A-00001					
ITEM NO. (a)	SUPPLIES/SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
	<p>Detention Trustees (OFDT), United States Marshal Service (USMS) Contract ODT-7-C-0003 for Detention Management Services at the Rio Grande Detention Center located in Laredo, Texas. This BPA authorizes ICE direct ordering authority with the vendor, GEO Group Inc in accordance with OFDT Contract ODT-7-C-0003, Modification #44.</p> <p>This BPA, including all proceeding delivery orders shall be placed in accordance with the terms and conditions of Contract ODT-7-C-0003. The OFDT Contract, including the modification authorizing ICE to issue direct delivery orders to the vendor is attached to this BPA.</p> <p>Exempt Action: Y</p> <p>Period of Performance: 01/01/2014 to 04/20/2027</p>					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))



\$0.00

AUTHORIZED FOR LOCAL REPRODUCTION
PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 348 (Rev. 4/2006)
Prescribed by GSA FAR (46 CFR) 53.213(f)

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8. NAME AND ADDRESS OF CONTRACTOR (No, street, county, State and ZIP Code) GEO GROUP INC THE (b)(6)(b)(7)(C) 621 NW 53RD ST STE (b)(7)(C) BOCA RATON FL 334878242		(x) 9A. AMENDMENT OF SOLICITATION NO.	
		9B. DATED (SEE ITEM 11)	
		X 10A. MODIFICATION OF CONTRACT/ORDER NO. HSCEDM-14-A-00001	
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CODE 6127064650000 FACILITY CODE			

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DUNS Number: 612706465

The purpose of this modification to this agreement is to:

1) Update the rate for Off Site Guard Services in accordance with United States Marshal Service (USMS) Contract ODT-7-C-0003 Modification #0056. The rate will increase from (b)(4) per hour.

2) Update the COR and ALT COR for this contract.

COR Changed:

(b)(6)(b)(7)(C)

From _____

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print)

16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)

(b)(6)(b)(7)(C)

15B. CONTRACTOR/OFFEROR

15C. DATE SIGNED

(Signature of person authorized to sign)

16C. DATE SIGNED

2/6/2015

NSN 7540-01-152-8070

Previous edition unusable

FORM 30 (REV. 10-83)

Prescribed by GSA

FAR (48 CFR) 53.243

NAME OF OFFEROR OR CONTRACTOR
GEO GROUP INC THE

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>To: (b)(6);(b)(7)(C) Email: (b)(6);(b)(7)(C) Phone: 956-729 (b)(6);(b)(7)(C)</p> <p>Alt To: (b)(6);(b)(7)(C) From: (b)(6);(b)(7)(C) Email: (b)(6);(b)(7)(C) Phone: 956-729 (b)(6);(b)(7)(C)</p> <p>This BPA, including all proceeding delivery orders shall be placed in accordance with the terms and conditions of Contract ODT-7-C-0003. The OFDT Contract, including the modification authorizing ICE to issue direct delivery orders to the vendor is attached to this BPA.</p> <p>Exempt Action: Y</p> <p>Period of Performance: 01/01/2014 to 04/20/2027</p>				

ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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		c. CITY												
		d. STATE												
		e. ZIP CODE												
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b. COMPANY NAME		g. TYPE OF ORDER												
c. STREET ADDRESS 621 NW 53RD ST STE (b)(6),(b)(7)(C)		<input type="checkbox"/> a. PURCHASE REFERENCE YOUR: <input type="checkbox"/> b. DELIVERY Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheet, if any, including delivery as indicated.												
d. CITY BOCA RATON		e. STATE FL	f. ZIP CODE 334878242											
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11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <table border="0"> <tr> <td><input type="checkbox"/> a. SMALL</td> <td><input checked="" type="checkbox"/> b. OTHER THAN SMALL</td> <td><input type="checkbox"/> c. DISADVANTAGED</td> <td><input type="checkbox"/> d. WOMEN OWNED</td> <td><input type="checkbox"/> e. HUBZone</td> </tr> <tr> <td><input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED</td> <td><input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM</td> <td><input type="checkbox"/> h. EDWOSB</td> <td colspan="2"></td> </tr> </table> 12. F.O.B. POINT Destination					<input type="checkbox"/> a. SMALL	<input checked="" type="checkbox"/> b. OTHER THAN SMALL	<input type="checkbox"/> c. DISADVANTAGED	<input type="checkbox"/> d. WOMEN OWNED	<input type="checkbox"/> e. HUBZone	<input type="checkbox"/> f. SERVICE-DISABLED VETERAN-OWNED	<input type="checkbox"/> g. WOMEN-OWNED SMALL BUSINESS (WOSB) ELIGIBLE UNDER THE WOSB PROGRAM	<input type="checkbox"/> h. EDWOSB		
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17. SCHEDULE (See reverse for Rejections)

ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
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	18. SHIPPING POINT	19. GROSS SHIPPING WEIGHT	20. INVOICE NO.			17(h) TOTAL (Cont. pages)
	21. MAIL INVOICE TO: a. NAME Indicated on call				\$0.00	
SEE BILLING INSTRUCTIONS ON REVERSE	b. STREET ADDRESS (or P.O. Box)					17(i) GRAND TOTAL
	c. CITY (b)(6),(b)(7)(C)				\$0.00	

22. UNITED STATES OF

AMERICA BY (Signature)

NAME (Typed)

(b)(6),(b)(7)(C)

E. CONTRACTING/ORDERING OFFICER

**ORDER FOR SUPPLIES OR SERVICES
SCHEDULE - CONTINUATION**

PAGE NO

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IMPORTANT: Mark all packages and papers with contract and/or order numbers.

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TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))



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